SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 170700F 24943 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DCCC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name POPE, SUSIE, , , Date of Receipt Mailing Address 1710 NW 89TH ST 01 2021 City Zip Code State Transaction ID: 35208989 WA **SEATTLE** 98117-3513 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **ACCOUNTANT** SELF-EMPLOYED Receipt For: Aggregate Year-to-Date ▼ Primary General * EARMARKED CONTRIBUTION THROUGH 333.00 ACTBLUE PAC ON 08/01/2021 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. POPE, SUSIE, , , Date of Receipt Mailing Address 1710 NW 89TH ST 2021 City State Zip Code Transaction ID: 35430150 WA **SEATTLE** 98117-3513 Amount of Each Receipt this Period FEC ID number of contributing 19.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYÉD **ACCOUNTANT** Receipt For: Aggregate Year-to-Date ▼ Primary General * EARMARKED CONTRIBUTION THROUGH Other (specify) ▼ 352.00 ACTBLUE PAC ON 08/30/2021 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. POPEO, R., ROBERT, , Date of Receipt Mailing Address 1 FINANCIAL CTR 30 2021 FL 46 City State Zip Code Transaction ID: 35460081 MA **BOSTON** 02111-2662 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MINTZ LEVIN **ATTORNEY** Receipt For: Aggregate Year-to-Date ▼ Primary General INDIVIDUAL CONTRIBUTION 10000.00 Other (specify) 10044.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....